

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

2008 OCT 31 PM 3:01

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

IMPORTANT: Indicate by # type of committee you are reporting for: ☒ 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

CARLIN HAGEMAN

Political Party (if applicable)

REPUBLICAN

Office Sought

STATE HOUSE

District (if Senate or House)

19

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE

REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Paul R. Nielsen

SIGNATURE OF PERSON FILING REPORT

319-277-0820

TELEPHONE

10-31-08

DATE SIGNED

I AM FILING A 10-31-08

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 2,749.20

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

4,680.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 7,429.20

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2,069.49

Schedule F: Loan Repayments total (Attach Schedule F)

5,359.71

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 403.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-17-08	ID# 9775 CK# 1062	TEAM IOWA PAC 400 LOCUST STREET, SUITE 330 DES MOINES, IOWA		\$1500.00	<input type="checkbox"/>
10-21-08	ID# 6400 CK# 638	IOWA RESTAURANT ASSOC PAC 8525 DOUGLAS, SUITE 47 DES MOINES, IOWA		150.00	<input type="checkbox"/>
10-24-08	ID# CK# 1226	RICHARD VANDE KIEFT 3100 SHADY LANE CEDAR FALLS, IOWA		50.00	<input type="checkbox"/>
10-24-08	ID# CK# 460	MARVIN E DIEMER 5026 BLUEBELL ROAD CEDAR FALLS, IOWA		100.00	<input type="checkbox"/>
10-24-08	ID# CK# 1368	RONALD L WHEELER 2421 SUNSET BOULEVARD CEDAR FALLS, IOWA		30.00	<input type="checkbox"/>
10-24-08	ID# CK# 2394	PAUL R NIELSEN 275 PAR DRIVE DIKE, IOWA		200.00	<input type="checkbox"/>
10-24-08	ID# CK# 6741	GAYLE A JUHL 19139 GRUNDY ROAD HUDSON, IOWA		100.00	<input type="checkbox"/>
10-24-08	ID# 9778 CK#	IOWANS FOR FREEDOM PAC 12834 CARPENTER TRAIL CARLISLE, IOWA		1000.00	<input type="checkbox"/>
10-24-08	ID# 9771 CK# 1001	IOWANS FOR RIGHT TO WORK PAC 4225 FLUER DRIVE, SUITE 122 DES MOINES, IOWA		1500.00	<input type="checkbox"/>
	ID# CK#	UNITEMIZED CONTRIBUTIONS		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 4680.00	
TOTAL (If last page of this schedule)				\$ 4680.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-15-08	ID# CK# 1030	REPUBLICAN PARTY IOWA 621 EAST 9TH DES MOINES, IOWA	RADIO & TV ADS	\$ 1500.00
10-16-08	ID# CK# 1031	UNIVERSITY BOOK & SUP 1009 W 23RD STREET CEDAR FALLS, IOWA	FED EX POSTAGE	19.49
10-28-08	ID# CK# 1032	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	550.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2069.49
TOTAL (if last page of this schedule)				\$ 2069.49

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

SCHEDULE
E
(Rev. 06/97)IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-24-08	IOWANS FOR RIGHT TO WORK PAC 4225 FLEUR DRIVE, SUITE 122 DES MOINES, IOWA		SUPPLIES	\$ 403.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 403.00	
TOTAL (if last page of this schedule)				\$ 403.00	

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(for Schedule E)